



EMPLOYER OF LOBBYIST REGISTRATION

INSTRUCTIONS: Commencing October 1, 2006, this form must be annually completed and filed by every person qualifying as the employer of a lobbyist under the Lobbyist and Employer of Lobbyist Registration and Disclosure Act (Tenn. Code Ann. §§ 3-6-301, et seq.), within **seven (7)** days after employing a lobbyist. Registration forms may be mailed (preferably by overnight service or by registered or certified mail), or hand-delivered to the Tennessee Ethics Commission, SunTrust Bank Building, Suite 1820, 201 4th Avenue North, Nashville, Tennessee 37243. Please type or print all information in ink. A registration fee in the amount of one hundred and fifty dollars (\$150.00) per lobbyist retained by the employer must be paid to the Commission within thirty (30) days after registration. Checks should be made payable to the "Tennessee Ethics Commission." Please retain a copy of your registration form for your records. **Any amendments to an employer's registration shall be filed within seven (7) days following the occurrence of any event, action or changed circumstance that renders the registration statement inaccurate or incomplete.**

1. NAME

2. DATE REGISTRATION SUBMITTED

3. BUSINESS ADDRESS

3.A. BUSINESS PHONE

4. EMAIL ADDRESS

5. NAME OF CHIEF EXECUTIVE OFFICER (if a corporation, association or governmental entity)

6. NAME OF CHIEF FINANCIAL OFFICER (if a corporation, association or governmental entity)

7. NATURE OF EMPLOYER'S BUSINESS

8. NAME OF LOBBYIST AUTHORIZED TO REPRESENT EMPLOYER (please list each additional lobbyist authorized to represent you, including business address, phone number and email address, on a separate page)

9. LOBBYIST'S BUSINESS ADDRESS

9.A. LOBBYIST'S BUSINESS PHONE

10. LOBBYIST'S EMAIL ADDRESS

TO BE SIGNED BY EMPLOYER OR EMPLOYER REPRESENTATIVE

I do solemnly swear or affirm that I am a duly authorized representative of the Employer and the above named person(s) is/are authorized to lobby on my behalf or on behalf of the organization that I represent and that the information contained in this statement is complete and accurate and that I have complied with all requirements of the Lobbyist and Employer of Lobbyist Registration and Disclosure Act. I understand that the filing of information on this statement knowing or having reason to know that such information is inaccurate or complete is subject to the imposition of civil penalties. I further do solemnly swear or affirm that a copy of the Tennessee Ethics Commission Manual for Lobbyists and Employers of Lobbyists has been delivered to me or my representative by the lobbyist(s) named above, pursuant to Tenn.Code Ann. § 3-6-114.

Signature of Employer or Employer Representative